

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 7/1/05

2 Serial/Patent # 10/58149

3 Please refund the following fee(s):

4 PAPER
NUMBER

5 DATE
FILED

6 AMOUNT

☒ Filing

12/1/04

\$ 100.00

☐ Amendment

\$

☐ Extension of Time

\$

☐ Notice of Appeal/Appeal

\$

☐ Petition

\$

☐ Issue

\$

☐ Cert of Correction/Terminal Disc.

\$

☐ Maintenance

\$

☐ Assignment

\$

☐ Other

\$

7 TOTAL AMOUNT
OF REFUND

\$

8 TO BE REFUNDED BY:

☒ Treasury Check

☐ Credit Deposit A/C #:

9

10 REASON:

☒ Overpayment

☐ Duplicate Payment

☐ No Fee Due (Explanation):

11 REFUND REQUESTED BY: CHARITTA BURT

TYPED/PRINTED NAME: Charitta Burt

TITLE: Paralegal

SIGNATURE: Charitta Burt

PHONE: 308-9140x20

OFFICE: PCT

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: Harry Huetz

DATE: 7/1/05

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

12 Rec'd PCT/PTO 1-7 DEC 2004

PTO-1390 (Rev. 12-2004)

Approved for use through 3/31/2007. OMB 0651-0021
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U.S. APPLICATION NO. (if known, see 37 CFR 1.5) 10/518149		INTERNATIONAL APPLICATION NO. PCT/JP2003/008077		ATTORNEY'S DOCKET NUMBER 0149-045841	
21. The following fees are submitted:					
<input checked="" type="checkbox"/> a) Basic national fee.....				\$ 300.00	
<input checked="" type="checkbox"/> b) Examination fee.....				\$ 200.00	
<input checked="" type="checkbox"/> c) Search fee.....				\$ 500.00	
TOTAL OF ABOVE CALCULATIONS =				\$1000.00	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra sheets	Number of each additional 50 or fraction thereof (round up to a whole number)		RATE	
- 100 =	/50 =			x \$250.00	\$
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e)).				\$ 130.00	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	\$	
Total claims	15 - 20 =	0	x \$50.00	\$	
Independent claims	4 - 3 =	1	x \$200.00	\$ 200.00	
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$360.00	\$	
TOTAL OF ABOVE CALCULATIONS =				\$ 1330.00	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.					
SUBTOTAL =				\$ 1330.00	
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				\$	
TOTAL NATIONAL FEE =				\$ 1330.00	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property				\$	
TOTAL FEES ENCLOSED =				\$ 1330.00	
				Amount to be refunded:	\$
				Amount to be charged:	\$
<p>a. <input checked="" type="checkbox"/> A check in the amount of \$ <u>1330.00</u> to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>23-0650</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.</p>					
<p>Refund of \$100.00</p> <p>SEND ALL CORRESPONDENCE TO:</p> <p>07/12/2005 CRUR1 0000145747</p> <p>Russell D. Orkin</p> <p>Webb Ziesenheim Logsdon Orkin & Hanson, P.C.</p> <p>450 Seventh Avenue \$100.00</p> <p>700 Koppers Building</p> <p>Pittsburgh, PA 15219-1818</p> <p>Telephone: (412) 471-8815</p> <p>Facsimile: (412) 471-4094</p>					
				SIGNATURE	
				Russell D. Orkin	
				NAME	
				25,363	
				REGISTRATION NUMBER	

FORM PTO-1390 (REV. 12-2004)

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Check Refund	
Refund Status Window Help	
<div>Refunded Payment</div> <div>Payment from check no.: 076431 Bank Routing Code: 043000096 Acct No.: XXXXXX709</div>	
<div>Check Refund</div> <div><div>Number: 145747</div><div>Hold Date: 07/12/2005</div><div>Amount: 100.00</div><div>Treas Check No:</div><div>Refund Cat: NONGOVNMNT</div><div>Status: INPROCSS</div><div>Fee Cd:</div><div>Name/Number: 10518149</div><div><div>Issue Method</div><div><input type="radio"/> Electronic</div><div><input checked="" type="radio"/> Paper</div></div><div><div>PCT Code</div><div><input type="radio"/> WIPO</div><div><input type="radio"/> EPO</div><div><input checked="" type="radio"/> None</div></div></div>	
<div>Mailing Address</div> <div><div>Payee Name: WEBB ZIESENHEIM LOGSDON ORKIN & HANSON</div><div>Attention: RUSSELL D. ORKIN</div><div>Street: 436 SEVENTH AVENUE 700 KOPPERS BUILDING</div><div>City: PITTSBURGH</div><div>Province:</div><div>State: PA</div><div>Country: US</div><div>Postal Code: 15219-4094</div><div><div>Tax Identification No:</div></div></div>	
<div>WCLAYBRO</div> <div>07/19/2005</div>	

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7-18-05